

Draft Meeting Agenda
South Dakota Board of Examiners of Psychologists
Holiday Inn Express, 110 E. Stanley Road, Fort Pierre, SD 57532 (Central Time)
October 12, 2018
8:30AM CDT

Persons wishing to join the business meeting via teleconference will need to contact the Board Office at (605) 642-1600 by October 10, 2018 to arrange for a call-in number.

Member Listing:

1. Thomas Stanage, Ph.D., President
2. Karen Wiemers, Ph.D., Vice-President
3. Trisha Miller, Ph.D., Secretary
4. Matthew Christiansen, Ph.D., Member
5. Robert Buri, Ph.D.
6. Robert Overturf, Lay Member

Purpose: The Board protects the health and safety of the consumer public by licensure of qualified persons, enforcement of the statutes, rules and regulations governing the practice of psychology, including the appropriate resolution of complaints.

8:30AM CST-Oral Examination

Applicant #574

Applicant #573

Applicant #572

Tentative Applicants:

Applicant #571

Applicant #386

The Business Meeting will convene following the oral examinations.

1. Call to Order/Welcome and Introductions-Stanage
2. Roll Call-Stanage
3. Conflicts to declare
4. Corrections or additions to the agenda
5. Approval of Agenda
6. Public Testimony/Public Comment Period-11:00 a.m.
7. Approval of Minutes from June 1, 2018, August 3, 2018
8. FY Financial Update
9. ASPPB Fall meeting October 17-21, 2018-Salt Lake, UT
10. Executive Session-Pursuant to SDCL 1-25-2
 - a. Complaints/investigations
 - a. #215-update
 - b. #216
 - c. #217-I
 - b. Applicant for Licensure #2018-2
11. EPPP-2
12. CEU discussion
13. CPQ, PLUS discussion
14. PSYPACT discussion
15. Vote on Code of Conduct
16. Board training materials

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South Dakota Board of Examiners of Psychologists

October 12, 2018

17. Applicant #384-request for oral examination

18. Any other business coming in between date of mailing and date of meeting

19. Schedule next meeting

20. Adjourn

SOUTH DAKOTA BOARD OF EXAMINERS OF PSYCHOLOGISTS
DRAFT BOARD MEETING MINUTES
June 1, 2018
Deadwood, SD

Members Present: Thomas Stanage, Ph.D., (President); Karen Wiemers, Ph.D., (Vice President); Trisha Miller, Ph.D., (Secretary); Robert Buri, Ph.D. (New Member); Matthew Christiansen, Ph.D., Member; Robert Overturf, Lay Member; Alice Bruce, Lay Member

Members Absent: None.

Others Present: Carol Tellinghuisen, Executive Administrator; Jill Lesselyoung, Administrative Assistant; Brooke Tellinghuisen Geddes, Administrative Assistant; Marilyn Kinsman, Senior Policy Analyst for South Dakota DSS replacing Robert McCarthy (via teleconference); Gina Nelson, Legal Counsel for the Board (via teleconference); Mark Perrenoud, Ph.D., SDPA Board Member; Jerry Buchkoski, Ph.D. (via teleconference)

Stanage called the meeting to order at 8:26am MST.

Executive Session: The board entered executive session at 8:27am MST on a unanimous roll call vote based on a motion by Overturf and a second by Christiansen for the purpose of administering Orals Examination to Applicant #389. The board exited executive session at 9:15am MST based on a motion by Wiemers and a second by Bruce.

Welcome and Introductions: Guests and new members were welcomed by Stanage and introductions were facilitated.

Roll Call: Stanage requested executive staff to facilitate roll call, which occurred at 9:17am MST.

Corrections or Additions to the Agenda: None. CEU Discussion and Collection and Dissemination of Email Addresses items were moved up the agenda to accommodate guests present particularly for those items (Dr. Mark Perrenoud and Dr. Jerry Buchkoski).

Approval of Agenda: Christiansen motioned, Bruce seconded to approve revised meeting agenda. Motion carried unanimously.

Public Testimony/Public Comment Period: There were no persons from the public present for comment.

Marilyn Kinsman entered the meeting via conference call at 9:20am MST.

Approval of Minutes from April 4, 2018 and February 9, 2018 Meetings: Wiemers made motion to approve April 4, 2018 with removal of one line [which read "Motion carried by a unanimous roll call vote (Christiansen absent)."]; Bruce seconded. Motion carried on unanimous vote. Wiemers motioned to approve February 9, 2018 minutes as written; Bruce seconded. Motion carried on unanimous vote.

New Senior Policy Analyst for DSS: Board welcomed Marilyn Kinsman, Senior Policy Analyst for DSS, who is replacing previous Senior Policy Analyst for the board, Robert McCarthy.

Financial Update: Lesselyoung reported on the finances both as of April 30, 2018 and fiscal year end 2017. Lesselyoung reported that as of April 30, 2018, Revenue was at \$24,415.19, Expenditures were at \$49,855.84, and Cash Balance was at \$66,829.19. Lesselyoung reported on fiscal year-end figures as of June 30, 2017: Current Revenue was \$64,022.79; Expenses were \$51,617.11; Cash Balance was \$91,269.84. Lesselyoung and Tellinghuisen reminded board that atypical expenditures involved with approved computer update which occurred over the last several months is included in these figures. Miller moved and Bruce seconded motion to accept both financial reports. Motion carried on unanimous vote.

ASPPB Midwinter Meeting Update: Stanage attended meeting in Savannah, GA. Stanage reported on several constructs from and related to the meeting: 1) SD Board of Examiners operates on significantly less resources in comparison to other states' psychology boards (i.e., no full-time attorney, no full-time investigators and staff constraints compared to other states that have several full time attorneys, full time investigators and a large full time staff), 2) Theme of meeting was Accountability and Ethics, with emphasis on procedure and training of board members. Examples of "things gone wrong," including need for firewall between state association and state board of examiners, etc. and prime example of North Carolina Board of Dentistry's restraint of trade error highlighted, 3) Council on Licensure and Enforcement (CLEAR) has online board training to be considered by all boards, 4) Federation of Association of Regulatory Boards (FARB) has developed a code of conduct to be considered, and 5) EPPP-2 status was discussed in great detail, with aspects of marketing change, mandatory vs. state-decision, and cost concerns from graduate programs and students being primary topics.

Kinsman encouraged board to consider in-state training sponsored by Governor's office on June 12, 2018 @ 1:15pm CST in Pierre, SD on the NC Dental Case. Executive staff will look into the possibility of DDN access for this training and make board members aware. Kinsman reminded the Board that the Bureau of Finance and Management's Code of Conduct will be approved soon.

Nelson joined meeting via teleconference at 9:45am MST.

ASPPB Fall Meeting: Meeting will be held October 17-21, 2018 in Salt Lake City, UT. Christiansen motioned to approve a board member and/or staff member to attend the Fall 2018 ASPPB meeting, Wiemers seconded. Motion passed on unanimous vote.

Council on Licensure, Enforcement, and Regulation (CLEAR): Stanage initiated discussion about services offered by CLEAR. Board office will put together training materials for the next meeting along with the new Open Meeting Laws.

Executive Session- Pursuant to SDCL-1-25-2: Overturf motioned and Bruce seconded to enter executive session for purpose of discussing two agenda items, Complaints/Investigations and Applicant for Licensure #2018-1. Following a unanimous vote, the Board entered executive session at 9:54am MST. Nelson remained present via teleconference; Kinsman left the meeting. Bruce moved, Buri seconded to exit executive session; motion carried unanimously at 10:23am MST.

Licensure Applicant #389: Wiemers motioned, Overturf seconded to approve SD licensure for Applicant #389. Motion passed unanimously.

Buchkoski entered meeting via teleconference at 10:20am MST. Perrenoud, representing South Dakota Psychological Association, entered the meeting at 10:25am MST. Kinsman rejoined at 10:25am MST.

CEU Discussion: Stanage requested Perrenoud to present information gathered with regard to proposed CEU changes. Perrenoud presented information and possibilities to consider, with primary emphasis on establishing a higher minimum requirement for CEU's as current statute requires only one and all other states have a higher set CEU requirement. Tellinghuisen advised that there is no set minimum but rather statute states continuing education requirements shall not exceed 6 CEUs (60 contact hours) per year. She advised that the Board has the authority to set minimum continuing education requirements in rules. Stanage requested Buchkoski's comments on the topics, which Buchkoski then offered, voicing multiple concerns including loss of licensed psychologists, (monetary concerns), the border between the SDPA and the Board, the survey was only disseminated to SDPA members and he does not see a problem that needs to be fixed as South Dakota psychologists are already obtaining more than the national average of continuing education. Discussion was held with regard to current statute requirements, consideration of potential increased monetary and time costs for the board office, and what would need to be done to establish a new rule requirement. Miller made motion to move forward in developing a proposal for a set minimal CEU requirement in SD, with board executive staff looking into parameters for requirements, costs associated with, implications of, and rule changes in the state. Buri seconded the motion. Motion passed unanimously.

Nelson had left the call amidst the CEU Discussion topic, at 11:15am MST. Buchkoski left the meeting at 11:30am MST.

Collection and Dissemination of Email Addresses: Perrenoud made Board aware of SDPA's desire to establish an email list of licensed psychologists in the state, to include both SDPA members and non-SDPA members, and requested Board to consider placing a box on the initial licensure application or on licensure renewal forms that individuals could mark to agree for their email address to be added to the list to be shared with SDPA. After discussion, Tellinghuisen advised and the Board agreed to send SDPA a mailing list for them to contact licensees directly to request email addresses.

Perrenoud exited the meeting at 11:39am MST.

Stanage facilitated break for board meeting at 11:39am MST. Board reconvened to continue agenda at 11:51am MST.

Forms Revision Update: Board members reviewed current licensure application packet forms, with recommended edits provided and explained by Miller. Board members collectively reviewed each recommendation and approved and denied edits were noted by executive staff so forms will be revised accordingly.

EPPP-2: Discussion was held as to board members' understanding of, concerns with, and South Dakota's best interest with regard to the potential rollout of EPPP-2. Stanage clarified the scenario-driven, practice-driven nature of this new second part of the EPPP. Some discussion was held about desiring the EPPP-2 to be non-mandatory and instead to be adopted by those states who desire to do so.

State Licensure Compact: Executive staff noted this legislative item failed in session this year. Kinsman stated she is not aware as of yet of whether there is intent for it to be reintroduced as a bill in the next legislative session. Some discussion was held about the CPQ and National Register; board executive staff will put these on the agenda for the next in-person meeting.

PSYPACT Discussion: Kinsman asked for more information with regard to PSYPACT. Board office staff offered to re-send information provided to McCarthy previously. Kinsman will review wording of proposed legislation and provide information to the board with regard to DSS acceptance or concerns at next meeting. Kinsman reminded the board that DSS is requesting a draft of anything for next legislative session by August 31, 2018. Discussion was held about PSYPACT, with financial implications in question. Board Executive staff will seek clarification from ASPPB about the costs for state boards.

Any Other Business: None.

Next Meeting: The next meeting was tentatively set for Friday, October 12, 2018 at 8:30am CST in Pierre, SD. Any business that needs to be addressed prior to this date will take place via teleconference.

Motion to adjourn was made by Bruce, seconded by Weimers. Stanage adjourned meeting at 1:04pm MST following unanimous vote to do so.

Respectfully submitted,

Trisha T. Miller, Ph.D.
Secretary

1-27-1.17. Draft minutes of public meeting to be available--Exceptions--Violation as misdemeanor. The unapproved, draft minutes of any public meeting held pursuant to § 1-25-1 that are required to be kept by law shall be available for inspection by any person within ten business days after the meeting. However, this section does not apply if an audio or video recording of the meeting is available to the public on the governing body's website within five business days after the meeting. A violation of this section is a Class 2 misdemeanor. However, the provisions of this section do not apply to draft minutes of contested case proceedings held in accordance with the provisions of chapter 1-26.

#7

SOUTH DAKOTA BOARD OF EXAMINERS OF PSYCHOLOGISTS
DRAFT BOARD MEETING MINUTES
Teleconference
August 3, 2018

Members Present on Call: Thomas Stanage, Ph.D., (President); Karen Wiemers, Ph.D., Vice President; Matthew Christiansen, Ph.D., Member; Trisha Miller, Ph.D., (Secretary); Robert Overturf, Lay Member; Alice Bruce, Lay Member

Members Absent: None.

Others Present: Carol Tellinghuisen, Executive Administrator; Jill Lesselyoung, Administrative Assistant

Stanage called the meeting to order at 3:02pm MDT. Roll call vote was taken by Jill Lesselyoung and determined a quorum was present.

Corrections or Additions to the Agenda: None.

Approval of Agenda: Buri motioned for approval of agenda as set; Wiemers seconded. Motion carried on unanimous roll call vote.

Public Testimony/Public Comment Period: Stanage asked if public person(s) were present on the call for public comment; no one presented.

Executive Session: The board entered executive session at 3:06pm MDT on a unanimous roll call vote based on a motion by Miller and a second by Bruce for the purpose of discussing status of complaints #214 and #215 and the ensuing investigations. The board exited executive session at 3:09pm MDT based on a motion by Wiemers and a second by Christiansen. Motion carried by a unanimous roll call vote.

Stanage requested Miller's recommendation on open complaint #214. Miller, as Investigator, recommended that the complaint is ready for dismissal due to licensee's completion of previously requested action from the board. Wiemers motioned to dismiss complaint #214, Bruce seconded. Motion carried on a unanimous roll call vote of Stanage, yes; Wiemers, yes; Bruce, yes; Buri, yes; Overturf, yes; with Miller abstaining.

Stanage requested Miller's recommendation on open complaint #215. Miller, as Investigator, recommended that the board submit a letter of concern to the licensee, along with the request that the licensee complete three in-person CEU's relevant to the current complaint within the next six months in lieu of pending hearing. Buri motioned, Bruce seconded to follow Miller's recommendation; motion carried by unanimous roll call vote of Stanage, yes; Wiemers, yes; Bruce, yes; Buri, yes; Overturf, yes; with Miller and Christiansen abstaining.

Motion to adjourn was made by Miller, seconded by Bruce, at 3:15pm MDT. Motion carried on a unanimous roll call vote.

Board of Examiners of Psychologists Teleconference Minutes
August 3, 2018
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Respectfully submitted,

Trisha T. Miller, Ph.D.
Secretary

1-27-1.17. Draft minutes of public meeting to be available--Exceptions--Violation as misdemeanor. The unapproved, draft minutes of any public meeting held pursuant to § 1-25-1 that are required to be kept by law shall be available for inspection by any person within ten business days after the meeting. However, this section does not apply if an audio or video recording of the meeting is available to the public on the governing body's website within five business days after the meeting. A violation of this section is a Class 2 misdemeanor. However, the provisions of this section do not apply to draft minutes of contested case proceedings held in accordance with the provisions of chapter 1-26.

#8

BOARD OF PSYCHOLOGY EXAMINERS
REVENUE SUMMARY
FOR MONTH ENDING 06/30/18

COMP	ACCOUNT	BDGT YEAR	GRANT YEAR	CENTER	FUND SRC	SUB FUND	FISCAL YEAR	FISCAL MONTH	YTD AMOUNT	MTD AMOUNT
6503	4293000	0	0	0892000	654		2018	12	\$ 68,500.00	\$ 22,250.00
6503	4920045			0892000	654		2018	12	\$ 765.19	\$ -
									\$ 69,265.19	\$ 22,250.00

BOARD OF PSYCHOLOGY EXAMINERS
EXPENDITURE SUMMARY REPORT
FOR MONTH ENDING 06/30/18

COMP	ACCOUNT	BDGT YEAR	GRANT YEAR	ACCOUNT DESCRIPTION	CENTER	FUND SRC	SUB FUND	FISCAL YEAR	FISCAL MONTH	YTD AMOUNT	MTD AMOUNT
6503	5101030	0	0	BOARD & COMM MBRS FEES	0892000	654		2018	12	\$ 2,100.00	\$ 540.00
6503	5102010	0	0	OASI-EMPLOYER'S SHARE	0892000	654		2018	12	\$ 164.11	\$ 41.31
6503	5203030	0	0	AUTO-PRIV (IN-ST.) H/RTE	0892000	654		2018	12	\$ 677.04	\$ -
6503	5203100	0	0	LODGING/IN-STATE	0892000	654		2018	12	\$ 156.60	\$ -
6503	5203120	0	0	INCIDENTALS-TRAVEL-IN ST.	0892000	654		2018	12	\$ 28.00	\$ -
6503	5203140	0	0	TAXABLE MEALS/IN-STATE	0892000	654		2018	12	\$ 45.00	\$ -
6503	5203150	0	0	NON-TAXABLE MEALS/IN-ST	0892000	654		2018	12	\$ 64.00	\$ -
6503	5203230	0	0	AUTO-PRIV.(OUT-STATE) H/R	0892000	654		2018	12	\$ 131.88	\$ -
6503	5203260	0	0	AIR-COMM-OUT-OF-STATE	0892000	654		2018	12	\$ 400.00	\$ -
6503	5203280	0	0	OTHER-PUBLIC-OUT-OF-STATE	0892000	654		2018	12	\$ 110.00	\$ -
6503	5203300	0	0	LODGING/OUT-OF-STATE	0892000	654		2018	12	\$ 878.28	\$ -
6503	5203350	0	0	NON-TAXABLE MEALS/OUT-ST	0892000	654		2018	12	\$ 125.00	\$ -
6503	5204020	0	0	DUES & MEMBERSHIP FEES	0892000	654		2018	12	\$ 350.00	\$ -
6503	5204030	0	0	LEGAL DOCUMENT FEES	0892000	654		2018	12	\$ 606.00	\$ -
6503	5204090	0	0	MANAGEMENT CONSULTANT	0892000	654		2018	12	\$ 43,431.42	\$ -
6503	5204180	0	0	COMPUTER SERVICES-STATE	0892000	654		2018	12	\$ 44.78	\$ 10.71
6503	5204201	0	0	BFM CENTRAL SERVICES	0892000	654		2018	12	\$ 1,445.64	\$ -
6503	5204203	0	0	PURCHASING CENTRAL SERV	0892000	654		2018	12	\$ 7.75	\$ -
6503	5204204	0	0	RECORDS MGMT SERVICES	0892000	654		2018	12	\$ 230.40	\$ -
6503	5204207	0	0	HUMAN RESOURCES SERVICES	0892000	654		2018	12	\$ 402.28	\$ -
6503	5204510	0	0	RENTS-OTHER	0892000	654		2018	12	\$ 3,186.55	\$ -
6503	5204530	0	0	TELECOMMUNICATIONS SRVCS	0892000	654		2018	12	\$ 42.00	\$ 16.00
6503	5204590	0	0	INS PREMIUMS & SURETY BDS	0892000	654		2018	12	\$ 1,141.00	\$ -
6503	5205320	0	0	PRINTING-COMMERCIAL	0892000	654		2018	12	\$ 1,612.34	\$ 6.98
6503	5205350	0	0	POSTAGE	0892000	654		2018	12	\$ 56.22	\$ -
										\$ 57,436.29	\$ 615.00

**BOARD OF PSYCHOLOGY EXAMINERS
CASH CENTER BALANCE
FOR MONTH ENDING 06/30/18**

[illegible]

BOARD OF PSYCHOLOGY EXAMINERS
REVENUE SUMMARY
FOR MONTH ENDING 08/31/18

COMP	ACCOUNT	BDGT YEAR	GRANT YEAR	CENTER	FUND SRC	SUB FUND	FISCAL YEAR	FISCAL MONTH	YTD AMOUNT	MTD AMOUNT
6503	4293000	0	0	0892000	654		2019	02	\$ 5,400.00	\$ 600.00
6503	4920045			0892000	654		2019	02	\$ 886.76	\$ 886.76
									\$ 6,286.76	\$ 1,486.76

BOARD OF PSYCHOLOGY EXAMINERS
EXPENDITURE SUMMARY REPORT
FOR MONTH ENDING 08/31/18

COMP	ACCOUNT	BDGT YEAR	GRANT YEAR	ACCOUNT DESCRIPTION	CENTER	FUND SRC	SUB FUND	FISCAL YEAR	FISCAL MONTH	YTD AMOUNT	MTD AMOUNT
6503	5102010	0	0	OASI-EMPLOYER'S SHARE	0892000	654		2019	02	\$ 4.12	\$ -
6503	5203030	0	0	AUTO-PRIV (IN-ST.) H/RTE	0892000	654		2019	02	\$ 1,176.00	\$ -
6503	5203100	0	0	LODGING/TN-STATE	0892000	654		2019	02	\$ 347.60	\$ -
6503	5203140	0	0	TAXABLE MEALS/TN-STATE	0892000	654		2019	02	\$ 54.00	\$ -
6503	5203150	0	0	NON-TAXABLE MEALS/TN-ST	0892000	654		2019	02	\$ 175.00	\$ -
6503	5204090	0	0	MANAGEMENT CONSULTANT	0892000	654		2019	02	\$ 10,911.62	\$ 3,513.51
6503	5204180	0	0	COMPUTER SERVICES-STATE	0892000	654		2019	02	\$ 10.82	\$ -
6503	5204201	0	0	BFM CENTRAL SERVICES	0892000	654		2019	02	\$ 323.11	\$ -
6503	5204204	0	0	RECORDS MGMT SERVICES	0892000	654		2019	02	\$ 57.60	\$ -
6503	5204207	0	0	HUMAN RESOURCES SERVICES	0892000	654		2019	02	\$ 109.15	\$ -
6503	5204510	0	0	RENTS-OTHER	0892000	654		2019	02	\$ 765.20	\$ 365.20
6503	5204530	0	0	TELECOMMUNICATIONS SRVCS	0892000	654		2019	02	\$ 16.00	\$ 16.00
6503	5205320	0	0	PRINTING-COMMERCIAL	0892000	654		2019	02	\$ 76.49	\$ -
										\$ 14,026.71	\$ 3,894.71

**BOARD OF PSYCHOLOGY EXAMINERS
CASH CENTER BALANCE
FOR MONTH ENDING 08/31/18**

[illegible]



ASPPB

Association of State and
Provincial Psychology Boards

#11

Supporting member jurisdictions in training their responsibility of public protection.

August 17, 2018

**A Message from the Board of Directors to Member Jurisdictions of the
Association of State and Provincial Psychology Boards**

Earlier this summer, I reached out to all of you to let you know that we were commencing a listening campaign to more fully understand the conversation relating to implementation details announced last October for the Enhanced EPPP. Thank you for taking the time to explore implementation implications within your jurisdictions and share your ideas, concerns, and thoughts with us.

We heard strong support for competency testing as part of the EPPP – and we still believe in it – but we also heard many unresolved concerns about our implementation plan. Be assured, our priority is not in enforcing the plan; our priority is in developing and working toward adoption of the best possible resource for you to evaluate the preparedness of new practitioners in our field.

Our unique position as an association is in the strong, trusting relationships we have built with you over the decades and our role as facilitator for you to learn, bond, and share across jurisdictions. We are here to support you in your responsibility of public protection, respecting your training and evaluative methods and your jurisdictional requirements. The adoption of the EPPP was a choice you each made over time and its universal use now allows for maximum mobility among practitioners. We are extremely proud of our role and these achievements and we will do everything we can to protect them while we improve our methods and find new ways to support you.

Based on your input this summer and our own priority-setting, the ASPPB Board of Directors on Sunday August 12, passed a motion to rescind our decision of August 2017 and announced to you in October that made the Enhanced EPPP (including both knowledge and skills portions) as the single licensure exam offered by the ASPPB. We will continue toward launch of the Enhanced EPPP in 2020 and make it available to states and provinces interested in serving as early adopters. We are lifting the requirement for use of the Enhanced EPPP and are lifting the deadline for implementation.

We have heard the concerns you have raised about the cost of the examination and the early admittance option to take the knowledge portion of the test at the completion of academic coursework (excluding research, practicum or internship). We are looking forward to continued discussion with you about these aspects of the implementation of the Enhanced EPPP.

We are in a culture of competency and accreditation standards have changed already. We know that your jurisdictions have processes in place to assess competency and we are confident that unqualified people are not being awarded unearned credentials. As stated earlier, our goal is to provide the best possible resource to you to evaluate your candidates. All jurisdictions will continue to receive detailed information about the nature, content, validity, and utility of the Enhanced EPPP as that information becomes available during 2020 and beyond.

We thank you for your candid and constructive responses this summer and we remain open to your ideas and concerns as we move forward to improve our testing resources. We welcome your feedback now, and we hope you will join us and continue this discussion in October when we gather in Salt Lake City at our Annual Meeting.

Sincerely,

Sharon Lightfoot, PhD
President, ASPPB Board of Directors
lightfootphd@sbcglobal.net
314-289-9981

President, Board of Directors – Sharon Lightfoot, PhD | Chief Executive Officer – Stephen T. DeMers, EdD

215 Market Road • PO Box 849 • Tyrone, Georgia • 30290 • (678) 216-1175 • www.asppb.org

The EPPP Part 2

The Assessment of Skills needed for the Independent Practice of Psychology

October 2017



The EPPP Part 2: The Assessment of Skills needed for the Independent Practice of Psychology

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An Overview of the Rationale for the EPPP Part 2

Assessing competence to practice independently is a critical function of psychology licensing boards and colleges throughout the United States and Canada. Competence is the integrated and habitual use of knowledge, skills, attitudes, and values in psychology. The evaluation and establishment of competence is necessary to ensure the protection of the public.

Establishing competence is the key to ensuring that a professional is capable of practicing as part of the profession safely and effectively (Rodolfa et al., 2005).

A current component of the profession's assessment of readiness for independent practice is a test of knowledge, the Examination for Professional Practice in Psychology (EPPP). The EPPP has served the profession well for over 50 years, but as the profession has moved toward embracing a culture of competence it has become clear that a standardized method to assess the skills needed to practice independently is also required. Other professions that embrace a culture of competence utilize knowledge-based and skills-based exams to determine readiness to practice independently.

Currently there are a number of educational models used to train students in the field of psychology, many of which are accredited by the American Psychological Association (APA) and the Canadian Psychological Association (CPA). The APA and CPA accreditation systems do not require a prescribed course of education and training. Rather the focus of both accreditation systems is on ensuring that the core competencies for the profession are covered as opposed to prescribing the means by which they are covered. Thus, there is diversity in how students are trained, resulting in sometimes vastly different levels of knowledge and skills in students. ASPPB values these accreditation systems, and in fact has endorsed the position that "... graduation from an APA or CPA accredited program should be a minimum requirement for doctoral level licensure for health service providers".

It should be noted that accreditation systems accredit training programs, *not* individuals. As licensing boards license individuals, it is their duty to assure the public that each individual who is licensed is competent to practice independently.

Evidence of a lack of standardization in training can be seen in the range of EPPP pass rates for APA/CPA-accredited programs, which ranges from 13% to 100% (ASPPB, 2016). Additionally, as can be seen from summary data on the APPIC Application for Psychology Internship, there is great variability in the type and quantity of practicum experiences that are required by accredited programs (APPIC, 2015, 2016). This variability in training models and experiences results in students accruing anywhere from a few hundred hours, to several thousand hours of practicum experience.

Not all academic programs, internships or post-doctoral residencies are APA/CPA accredited; thus, some individuals who become licensed have received training from programs that have not been reviewed by an external agency. Students from these academic programs

consistently underperform on the EPPP when compared to the average student from an accredited doctoral program (Lightfoot, Rodolfa & Webb, 2016). This raises questions about the effectiveness of the training provided by these programs, and suggests the importance of programs being reviewed by an external agency.

Concern regarding the reliability and validity of supervisor written assessments of trainees has been raised for years, and it has been demonstrated that supervisors tend to overestimate their supervisees' competence (e.g., Gonsalvez, 2007; Miller, Rodney, Van Rybrock & Gregory, 1988). This tendency is perhaps the result of the inherent conflict of being in gatekeeper and mentor roles simultaneously. The problem of supervisors overvaluing the competence of their supervisees led APPIC to change its format for intern letters of evaluation to encourage a more accurate evaluation of competence. APPIC requires supervisor letters to address the strengths and weaknesses of their trainees as opposed to a general statement of their performance. The issues of variability in ratings, a lack of standardization in the evaluative process, and the questionable validity of supervisor ratings make it difficult for licensing boards to attest to the competence of the psychologists they license. The EPPP Part 2 will provide an independent, standardized, reliable, and valid assessment of the skills necessary for independent practice.

Critically, the profession of psychology's move towards a "culture of competence" has resulted in essential agreement among key stakeholder groups (e.g., APA's CoA, CPA's AP, ACPRO and ASPPB) regarding the necessary competencies for independent practice. This essential agreement was a necessary precondition to developing a skills examination. Lastly, the technology is now available to assess skills via a computer based examination, rather than the costlier and time-consuming examination using either real or standardized patients. Thus, ASPPB concluded that it is the optimal time to develop a **standardized** examination to assess the functional skills necessary for independent practice.

In January 2016, the Board of Directors (BOD) of the Association of State and Provincial Psychology Boards (ASPPB) approved the development of a skills-based exam. The skills exam will enhance the knowledge-based examination that is currently administered as part of the licensure process. The first part of the new and enhanced EPPP will be the knowledge-based exam, the current EPPP, and the second part will be the skills-based (functional skills) exam, the EPPP Part 2. With a test to assess skills in addition to the current test to assess knowledge, licensing boards will have available to them an *enhanced EPPP* that will offer a standardized, reliable and valid method of assessing competence.

This document provides an overview of the development of the EPPP Part 2.

Developing an Empirical Base for a Competency Model

The historical efforts of the competency movement propelled the profession of psychology forward in its development of a conceptual basis for a competencies framework. ASPPB's initial attempt to use empirical evidence to inform the development of a competency model occurred in 2009 with the work of the ASPPB Practice Analysis Task Force (PATF). In addition to the task of revalidating the knowledge domains of the EPPP, the PATF was charged with: 1) identifying and validating underlying professional competencies in psychology, and 2) identifying assessment methods that would best measure these competencies. The goal of the EPPP practice analysis is to ensure that the exam reflects the knowledge necessary for competent practice, and in doing so the public interest is protected.

A competency model was proposed by the PATF based on the data obtained from the practice analysis. The PATF then developed a survey regarding the practice competencies identified in the model, and randomly sampled 4732 licensed psychologists from across Canada and the United States. Psychologists were asked to rate and comment on the relevance to the practice of psychology, of 37 competency statements and 276 behavioral exemplars in the following clusters:

- Scientific Knowledge
- Foundational competencies
 - Evidence-based decision making/critical reasoning cluster
 - Interpersonal and cultural competence cluster
 - Professionalism/ethics cluster
- Functional competencies
 - Assessment cluster
 - Intervention/supervision/consultation cluster

Survey respondents were asked to indicate the frequency with which they performed each competency in their practice during the previous year, the degree to which each competency was critical for optimizing outcomes for clients, and the importance of each competency to their psychology practice during the previous year. Respondents were also asked to comment on the point in their development at which a psychologist should be able to demonstrate each behavioral exemplar.

The ASPPB Competency Model and results of the survey were described in the Practice Analysis Report (ASPPB, 2010) and in an article written by members of the PATF (Rodolfa et al., 2013). The full report of the Practice Analysis is available on the ASPPB web site.

In 2010, the ASPPB Board of Directors appointed a task force to investigate the possibility of developing a method to assess functional skills. The Competency Assessment Task Force (CATF) used the PATF competency model as the basis of its continued development of an ASPPB Competency Model for Licensure. It reviewed the competency model, carefully exploring the data generated in the PAFT survey and comparing the model with other competency models, including the competency model utilized in Canada that is part of the Mutual Recognition Agreement (MRA).

The CATF developed criteria to focus the model to include only those competencies and behavioral exemplars that are the most relevant and needed at the point of initial licensure. The criteria chosen were based on empirical results from the PATF study. The CATF then conducted an in-depth examination of each competency and its related behavioral exemplars, eliminating redundancies and rewording for clarity when necessary. This process resulted in a model with 6 competency clusters, 32 competencies and 97 behavioral exemplars.

Once this was completed, the CATF sought the opinions stakeholders, conducting two surveys of the revised model of competency:

CATF Regulator Survey: The CATF surveyed the ASPPB membership to determine regulators' opinions regarding whether entry-level licensees/registrants should be able to demonstrate the 97 behaviors that defined in the model, and whether these behaviors are critical to public protection.

CATF Training Director Survey: The CATF subsequently surveyed the Association of Psychology Postdoctoral and Internship Centers (APPIC) membership (internship and postdoctoral residency training directors) and APPIC subscribers (academic program directors) regarding the competency model. Helpful ratings were received about which behavioral exemplars they felt trainees were expected to demonstrate at three different developmental levels (end of internship, end of postdoctoral residency, and post-licensure).

Results of the Surveys and 2014 Competency Model

Seventy regulators from 42 jurisdictions in the United States (81%) and 6 jurisdictions in Canadian (60%) provided empirical support for the majority of the model. The data from the training director survey (N=216) substantially mirrored the results of the regulator survey, and also provided empirical support for the model. As a result of the survey feedback, the CATF made further modifications to the proposed ASPPB Competency Model and eliminated the Supervision competency. The model, *ASPPB Competencies Expected at the Point of Licensure*, was approved by the ASPPB BOD in 2014.

2016 Job Task Analysis

Another job task analysis (also known as a practice analysis) was initiated in 2016 to revalidate the knowledge base for the EPPP Part 1 and to validate the current form of the competencies model to be used to provide the blueprint for the new exam, the EPPP Part 2. The Job Task Analysis Advisory Committee with the assistance of the exam vendor (Pearson Vue) analyzed the results of survey responses received from 2736 licensed psychologists from across Canada and the USA. The responses were used to formulate the *2017 version of the ASPPB Competencies Expected at the Point of Licensure*. The respondents, all of whom were practicing psychologists rated the competencies in the model according to whether or not they are needed at the point of licensure, as well as on the criticality and utility of each. The results validate the original competency model, with the addition of a Supervision competency. Changes were made to the structure of the original competency domains based on the data received and the feedback of the expert panel advising the job task analysis. Thus, there are different names for some of the domains in this latest iteration of the model (e.g., Professional Practice is focused on two major areas of practice - Assessment and Intervention; Systems Thinking has been broadened to include Collaboration, Consultation and Supervision). While most of the language of the competencies and behavioral exemplars was retained, some of the actual competencies and behavioral exemplars were refined, moved, clarified and updated, or deleted based on the data received. The comments below provide an overview, and Appendix A contains the updated ASPPB competency model which was empirically based on the input from these various sources. This model was approved by the ASPPB BOD in February, 2017. A full report of the 2016 Job Task Analysis is available on the ASPPB website.

2017 ASPPB Competencies Expected of Psychologists at the Point of Licensure

The 2017 version of the competency model contains the following competency domains:

1. **Scientific orientation:** This competency domain involves an orientation to the knowledge developed through the science of psychology, including evidence-based practice, as well as a scientific method of looking at and responding to psychological problems. This general competency also involves the knowledge of the core areas of psychology, which will not be assessed by the new competency part of the EPPP as they are currently well assessed by the Part 1 of the Examination for Professional Practice in Psychology.
2. **Assessment and Intervention:** This competency domain involves the provision of psychological assessment and intervention services to the public.
3. **Relational competence:** This competency domain includes the ability to engage in meaningful and helpful professional relationships, as well as to understand and interact appropriately in a variety of diverse cultural and social contexts. It includes the two sub-categories of diversity and relationships.
4. **Professionalism:** This competency domain includes personal competence, the ability to identify and observe the boundaries of competence and reflective practice, the ability to be self-reflective and to receive feedback from others in relationship to one's psychological activities.
5. **Ethical practice:** This competency domain involves the ability to apply both the ethical codes of the profession and the laws and regulations that govern the practice of psychology.
6. **Collaboration, Consultation, and Supervision:** This competency domain involves the ability to understand and work with individuals within broader systems and includes the skills to operate effectively and ethically within organizational structures, to collaborate with others in a cooperative, multidisciplinary manner and to effectively and ethically provide supervision to students, trainees and other professionals.

Appendix A contains a complete list of competencies and the behavioral exemplars that were identified within each competency cluster.

Comparison of Competency Models

A comparison of the competency clusters articulated in the current ASPPB Competency Model (2017), the competencies articulated in the Canadian Mutual Recognition Agreement (MRA, 2004), and the competency model contained in the APA Commission on Accreditation's (CoA) *Standards of Accreditation* (2015) is presented in Appendix B. In comparing these three models, it is clear that there is substantial overlap at the domain or cluster level of the models, as well as at the competency level. The comparison suggests that there is agreement among educators, practitioners, and regulators regarding the competencies required for the independent practice of psychology.

Assessment of Competence

Miller's Pyramid (1990) is an assessment framework that was designed for use in the assessment of practitioner clinical skills, and was developed for use by the profession of medicine. This framework was adapted by the CATF to describe the developmental process that psychologists go through as they establish the competence necessary for independent practice. The CATF's adaptation of the Pyramid provides a simple representation of the manner in which the practice competencies develop, and provides a useful rubric for their assessment. As displayed in Figure 1, the first and foundational stage in the pyramid is "KNOWS", the second is "KNOWS HOW", the third is "SHOWS HOW", and the fourth and final level is "DOES".

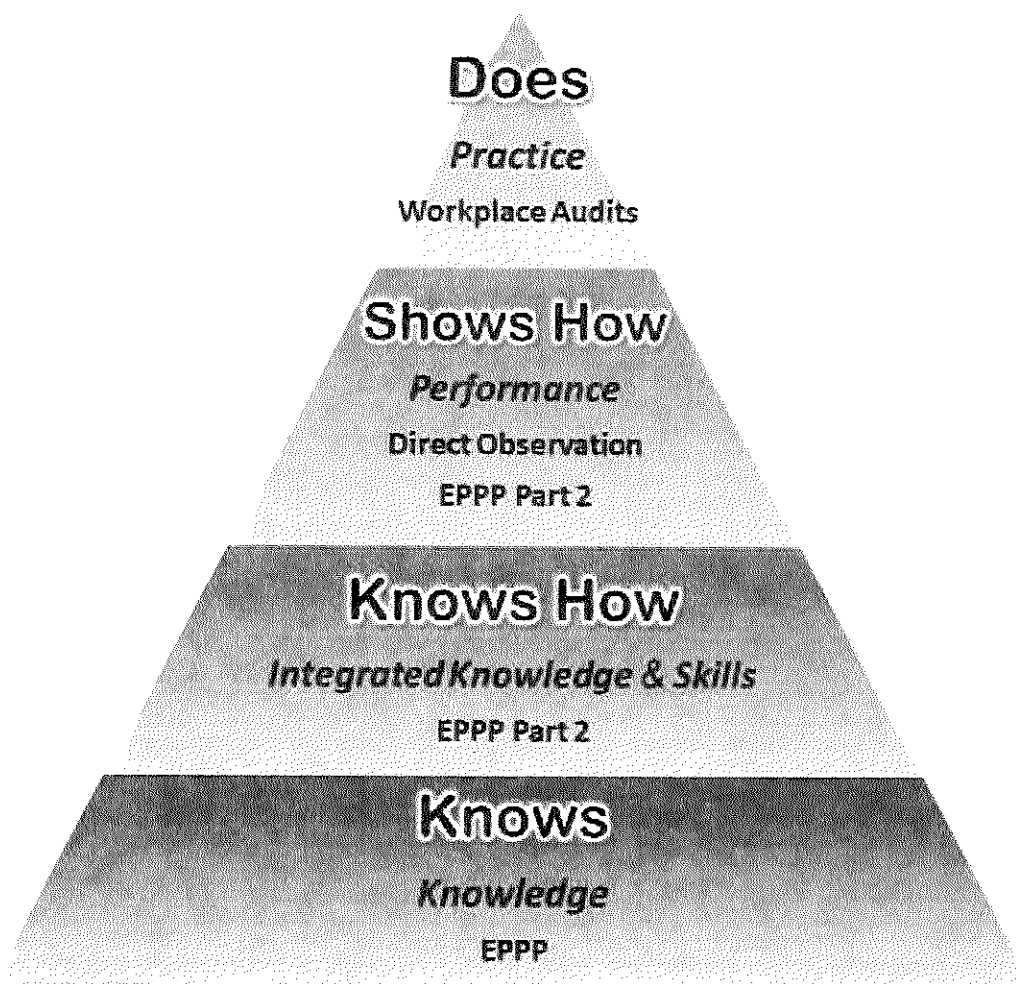
The EPPP Part 1 is a test of core knowledge in the profession, and in essence forms the base of the pyramid – "KNOWS." In this stage of competency development, the candidate knows information (e.g., the tenets that are part of a well-known theory of personality development), and can demonstrate this knowledge on the test. The next stage of competency development reveals that the candidate "KNOWS HOW" to do something (e.g., can state the basic procedure for administering common intelligence tests and "apply" such information to an assessment situation). The EPPP Part 2 will be able to assess many of the competencies related to the "KNOWS HOW" stage of competency development and a number of the competencies in the third stage, "SHOWS HOW", (e.g., correctly using a standard score table). Other competencies in the "SHOWS HOW" stage will need to be assessed through direct observation, either with an Objective Structured Clinical Examination (OSCE) or similar type of assessment tool, or by enhanced supervisor assessments.

It is important to stress that no single method can measure all of the competencies needed to practice psychology. Thus, the CATF discussed a number of other methods to assess a candidate's skills at each of the levels of the Pyramid. The CATF encouraged the development of enhanced competency-based supervisory evaluation forms and processes to be included in the information provided to psychology licensing boards/colleges that demonstrates the candidate's competency in terms of the "SHOWS HOW" stage.

The “DOES” stage reflects the actual practice of psychology that may be assessed in an ongoing way through practice or workplace audits. Epstein and Hundert’s (2002) often quoted definition of competency sums up ‘DOES’ as the “habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individual and community being served (p. 226). ... Competence depends on habits of mind including attentiveness, critical curiosity, self-awareness, and presence (p.228).” In the world of psychology licensing, however, assessment of the “DOES” stage remains a future endeavor.

The CATF’s adapted version of Miller’s Pyramid for assessing competency for licensure in psychology is shown below.

Miller’s Pyramid for the measurement of competence



Reviewing Methodologies to Assess Competency

Based on a review of the literature and consideration of testing methods in other professions, the two general methodologies that appeared to be the most appropriate for a skills examination were computer-based testing and in-person testing. The CATF reviewed each of the ASPPB competencies to determine how a skill might best be tested and determined that the majority of competencies could be sufficiently assessed by a computer-based, written examination. When the ASPPB Competency Model changed as a result of the 2016 Job Task Analysis, the members of the EPPP Part-2 Implementation Task Force and the ASPPB Job Task Analysis Advisory Committee reviewed each of the competencies of the revised model. Based on this review, it was again determined that the majority of the competencies could be sufficiently assessed through computer-based testing.

Computer-Based Testing Procedures

There is extensive information available in the literature about the use of innovative item types that can be administered to candidates via computer to assess competence (Parshall & Harmes, 2007, Parshall & Harmes, 2008). These innovative item types can be used to pose the “KNOWS HOW” questions and basic “SHOWS HOW” items as identified within the proposed assessment framework.

The current EPPP (now known as the EPPP Part 1) uses a multiple-choice examination format, but there are many other item type options for computer-based examinations. Such innovative item types include expanding the multiple-choice format to include a larger number of distractors or multiple correct responses, including sequencing questions (e.g., the best next steps to be taken in a series of actions). Other possibilities include fill-in-the-blank, short answer completion, or questions requiring the candidate to circle or highlight the most important information presented in a table, figure, or paragraph. Graphics and images (audio or video) and stimuli including short video vignettes with multiple serial questions can also be used. Although most commonly used as a summative evaluation of examinee’s mastery of the knowledge base (as the current EPPP does), carefully developed examinations can also evaluate a number of foundational and functional competencies.

Review of Competency Assessment Procedures Used by Other Professions

A review of how other human service professions evaluate the competency of applicants for licensure revealed that typically skills examinations are utilized. Most other professions require both a test of knowledge and a test of skills in their assessment of candidate competence to practice independently. The number of examinations utilized in assessing competence varies between professions, and can be two or three separate examinations.

The first examination is most commonly a test of what the candidate “KNOWS”; the second is a “KNOWS HOW” skills test; and when there is a third examination, it is a “SHOWS HOW” examination that requires the application of “KNOWS HOW” skills when interacting with another human being, typically a standardized patient. The intent is that the EPPP Part 2 will allow for assessment at both the “KNOWS HOW” and the “SHOWS HOW” stages of competency development.

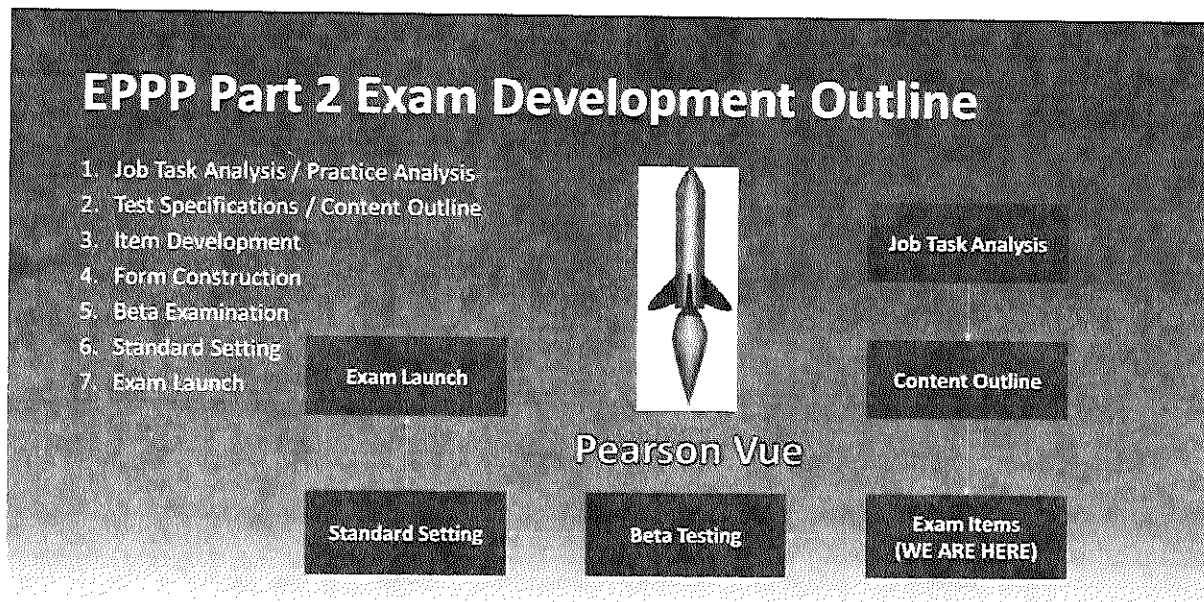
Other professions’ competency examinations are consistently based on their competency models. These competency models used to assess practice readiness typically include assessment, intervention, ethics, professional behavior and interpersonal behavior, and interprofessional consultations.

There were many different models for item development described by the professions. The CATF found that the most relevant model with the most utility for the development of a Knows How/Shows How Examination is used by the Medical Council of Canada. Their documents can be obtained at http://meds.queensu.ca/assets/CDM_Guidelines_e.pdf.

The Timeline for Skills Assessment in Psychology

As one might imagine, there are many tasks involved with the development of a skills examination. The time line below outlines the exam development tasks accomplished to this point, what remains to be done, and when it will be done. From 2010-2014, ASPPB developed a competency model with significant input from psychology member boards. In 2015 ASPPB determined that developing the EPPP Part 2 was feasible, both conceptually and financially. In 2016, the competency model was tested and validated through the 2016 job task analysis project that resulted in the blueprint that will form the basis for the structure of the EPPP Part 2. Over the next several years ASPPB will be training licensed psychologists to write items for the new exam. Both traditional item types like multiple choice questions, and innovative item types such as the use of avatars to demonstrate a targeted skill, presentation of a section of a test manual or a test protocol to use in answering questions, written vignettes with cascading questions, or questions that require ordering of information will be utilized in the new exam. During the coming years, ASPPB will develop a robust item bank, will create exam policies and procedures, and will develop multiple exam forms. ASPPB will then conduct beta testing for the new exam, and use the results of that testing to help create the final forms of the EPPP Part 2. The target date for launching the exam is January 2020.

EPPP Part 2 Exam Development Outline



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APPENDIX A: 2017 ASPPB Competencies Expected of Psychologists at the Point of Licensure

For ease of reading and understanding the model, the competencies are identified by the letter “C” and a number and the behavioral exemplars are identified by the letter “B” and a number.

Domain 1: Scientific Orientation

- C1. Select relevant research literature and critically review its assumptions, conceptualization, methodology, interpretation, and generalizability
 - B1. Critically evaluate and apply research findings to practice, with attention to its applicability and generalizability
 - B2. Interpret and communicate empirical research results in a manner that is easily understood by non-scientific audiences
- C2. Acquire and disseminate knowledge in accord with scientific and ethical principles
 - B3. Critically evaluate the literature relevant to professional practice
 - B4. Share psychological knowledge with diverse groups (e.g., students, colleagues, clients, other professionals, the public) within professional settings in an unbiased manner

Domain 2: Assessment and Intervention

- C3. Apply knowledge of individual and diversity characteristics in assessment and diagnosis
 - B5. Integrate knowledge of client characteristics in formulating assessment questions and understanding the reason for assessment
 - B6. Select assessment methods and instruments based on psychometric properties, available normed data and/or criterion-referenced standards, and address any limitations in that selection
- B7. Ensure that professional opinions, recommendations, and case formulations adequately reflect consideration of client characteristics
- C4. Demonstrate effective interviewing skills
 - B8. Adapt interview questions and behaviors in light of the characteristics of the interviewer and interviewee

- B9. Demonstrate flexible, empathic, and appropriate use of a broad range of interview techniques
- B10. Consider contextual information (e.g., reason for assessment, possible legal or forensic considerations) in conducting an interview
- C5. Administer and score instruments following current guidelines and research
 - B11. Administer, score, and interpret a range of commonly used standardized assessment instruments
 - B12. Adapt relevant guidelines in situations requiring non-standard administration, scoring, interpretation, or communication of assessment results
- C6. Interpret and synthesize results from multiple sources (e.g., multiple methods of assessment, written documentation, interviewees, collateral sources of information) following current guidelines and research
 - B13. Interpret and integrate results from standardized tests and interviews following established guidelines and, as appropriate, multiple applicable norm sets
 - B14. Identify the strengths and limitations of various types of assessment data
 - B15. Reconcile or explain discrepancies between various sources of data and suggest alternative interpretations or explanations in light of any limitations of assessment instruments
 - B16. Synthesize client-specific and scientific data with contextual factors to refine working hypotheses and develop conclusions and recommendations across a range of problems
- C7. Formulate and communicate diagnoses, recommendations, and/or professional opinions using relevant criteria and considering all assessment data
 - B17. Formulate diagnoses using current taxonomies
 - B18. Provide recommendations that incorporate client and contextual factors, including diagnoses
 - B19. Communicate assessment results to clients, referral sources, and other professionals in an integrative manner
- C8. Select interventions for clients based on ongoing assessment and research evidence as well as contextual and diversity factors
 - B20. Conceptualize intervention or treatment on the basis of evidenced-based literature

- B21. Integrate client or stakeholder opinions, preferences, readiness for change, and potential for improvement into intervention plan
- C9. Apply and modify interventions based on ongoing assessment, research, contextual factors, client characteristics, and situational and environmental variables
 - B22. Articulate evidence-based rationale for decisions, recommendations, and opinions to clients and others as indicated
 - B23. Continually evaluate, modify, and assess the effectiveness of interventions, considering all relevant variables including biases and heuristics
 - B24. Consult with qualified peers when facing the need to modify interventions in unfamiliar situations

Domain 3: Relational Competence

- C10. Integrate and apply theory, research, professional guidelines, and personal understanding about social contexts to work effectively with diverse clients
 - B25. Recognize, understand, and monitor the impact of one's own identities in professional situations
 - B26. Engage in respectful interactions with an awareness of individual, community, and organizational differences
 - B27. Modify one's own behavior based on self-reflection and an understanding of the impact of social, cultural, and organizational contexts
 - B28. Follow professional guidelines and the scientific literature, when available, for providing professional services to diverse populations
 - B29. Apply culturally appropriate skills, techniques, and behaviors with an appreciation of individual differences
- C11. Work effectively with individuals, families, groups, communities, and/or organizations
 - B30. Use relational skills to engage, establish, and maintain working relationships with arrange of clients
 - B31. Communicate respectfully, showing empathy for others
 - B32. Collaborate effectively in professional interactions
- C12. Demonstrate respect for others in all areas of professional practice

- B33. Consider differing viewpoints held by clients and others
- B34. Respond to differing viewpoints by seeking clarification to increase understanding before taking action
- C13. Identify and manage interpersonal conflict between self and others
 - B35. Manage difficult and complex interpersonal relationships between self and other
 - B36. Consult with peers to examine and address one's own reactions and behavior when managing interpersonal conflict

Domain 4: Professionalism

- C14. Identify and observe boundaries of competence in all areas of professional practice
 - B37. Identify limits of professional competence
 - B38. Use knowledge of professional competence to guide scope of practice
 - B39. Seek appropriate consultation when unsure about one's competence and additional needs for training and professional development
 - B40. Seek additional knowledge, training, and supervision when expanding scope of practice
 - B41. Update knowledge and skills relevant to psychological practice on an ongoing basis
- C15. Critically evaluate one's own professional practice through self-reflection and feedback from others
 - B42. Engage in systematic and ongoing self-assessment and skill development
 - B43. Accept responsibility for one's own professional work and take appropriate corrective action if needed
 - B44. Maintain awareness of personal factors that may impact professional functioning

Domain 5: Ethical Practice

- C16. Demonstrate and promote values and behaviors commensurate with standards of practice, including ethics codes, laws, and regulations
 - B45. Demonstrate integration and application of ethics codes and laws in all professional interactions

- B46. Communicate ethical and legal standards in professional interactions as necessary
- B47. Seek professional consultation on ethical or legal issues when needed
- B48. Discuss with peers or collaborators any ethical concerns with their behavior
- B49. Take appropriate Parts to resolve conflicts between laws or rules and codes of ethics in one's professional practice
- C17. Accurately represent and document work performed in professional practice and scholarship
 - B50. Maintain complete and accurate records
 - B51. Report research results accurately, avoiding personal biases
 - B52. Ensure adequate and appropriate credit is given to trainees and collaborators in scholarship
- C18. Implement ethical practice management
 - B53. Practice in a manner commensurate with laws, ethical standards, practice guidelines, and organizational constraints
 - B54. Manage billing practices in an ethical manner
- C19. Establish and maintain a process that promotes ethical decision-making
 - B55. Systematically identify the ethical and legal issues and conflicts that occur in professional practice
 - B56. Consult with peers to aid in ethical decision-making when needed
 - B57. Proactively address identified ethical issue

Domain 6: Collaboration, Consultation, and Supervision

- C20. Work effectively within organizations and systems
 - B58. Recognize the organizational and systemic factors that affect delivery of psychological services
 - B59. Utilize knowledge of organizations and systems to optimize delivery of psychological services
- C21. Demonstrate interdisciplinary collaborations
 - B60. Collaborate with various professionals to meet client goals
- C22. Consult and collaborate within and across professions

- B61. Tailor consultation requests and provision of information based on knowledge of others' professional needs and viewpoints
- B62. Use evidence-based psychological theories, decision-making strategies, and interventions when consulting
- B63. Continually evaluate, modify, and assess the effectiveness of consultation, considering all relevant variables
- C23. Evaluate service or program effectiveness across a variety of contexts
 - B64. Develop plans for evaluating service or program effectiveness
 - B65. Assess outcome effectiveness in an ongoing way
- C24. Ensure supervisee compliance with policies and procedures of the setting, the profession, and the jurisdiction
 - B66. Provide a supervision plan that details the supervisory relationship and the policies and procedures of supervision, including procedures to manage high-risk situations
 - B67. Identify responsibilities of supervisees towards clients, including informed consent and supervisory status
- C25. Monitor, evaluate, and accurately and sensitively communicate supervisee performance to the supervisee, the organization, and the jurisdiction as needed
 - B68. Regularly provide behaviorally anchored feedback about supervisee strengths and areas that need further development
 - B69. Assure that supervisees who are trainees practice within the scope of supervisor's competence and license
- C26. Create and maintain a supportive environment in which effective supervision occurs for trainees and other professionals being supervised
 - B70. Attend to the interpersonal process between supervisor and supervisee
 - B71. Monitor possible multiple roles or conflicts of interest, and work toward resolution, if needed

2017 Comparison of Competency Models

ASPPB	MRA (Canadian)	CoA (US)
Scientific Orientation <ul style="list-style-type: none"> Core Knowledge Domains 	Research <ul style="list-style-type: none"> Core Content Areas 	Research <ul style="list-style-type: none"> Discipline- Specific Knowledge (DSK)
Assessment and Intervention	Assessment and Evaluation Intervention	Assessment Intervention
Relational Competence	Interpersonal Relationships <ul style="list-style-type: none"> Knowledge of Others 	Individual & Cultural Diversity Communications & Interpersonal Skills
Professionalism	Interpersonal Relationships <ul style="list-style-type: none"> Knowledge of Self 	Professional Values, Attitudes & Behaviors
Ethical Practice	Ethics and Standards	Ethical and Legal Standards
Collaboration, Consultation and Supervision	Supervision Consultation Interpersonal Relationships <ul style="list-style-type: none"> Macro-environment 	Consultation & Interprofessional/Interdisciplinary Skills Supervision